

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	B		07-06-01
O.I.P.E. CLASSIFIER	ASD		7/12/01
FORMALITY REVIEW	BZ	503-883	08-17-01
RESPONSE FORMALITY REVIEW	ITC	712	02-26-02

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 ÷ ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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 121-124-125  
 Jc811  
 08/17/01

If more than 150 claims or 10 actions  
staple additional sheet here

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